## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2001

Application or Docket Number

09/97/99 0

			SMALL EN	<b>TIMY</b>	OR	OTHER SMALL E							
TOTAL CLAIMS			·					RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			Basic Fee	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			25 minus 20=		٠ 5			X\$ 9=		OR	X\$18=	90	
INDEPENDENT CLAIMS			3 minus 3 =		•			X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=	_	
* If the difference in column 1 is less than zero, enter "0" in column 2							,	TOTAL		OR	TOTAL	830	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							ı_	OTHER THAN SMALL ENTITY OR SMALL ENTITY					
AMENDMENTA		. CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	IEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 25	Minus	2	3	<b>.</b>		X\$ 9=		OR	X\$18=		
	Independent	• 3	Minus	***	3	=		X42=		OR	X84≃		
	FIRST PRESE	NTATION OF M	ULTIPLE DEP	ENDEN	CLAIM		J :	.:. <b>±140</b> =;::		OR:	: <b>±280</b> = <u> </u>		:=
								TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE		
	QTU105	(Column 1)		(Colu	mn 2):	(Column 3)			•		•		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUA PREV	HEST MBER HOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI-/ TIONAL FEE	
	Total	·cane	Minus	**		2	]	X\$ 9=		OR	X\$18=	/	
	Independent	• 500	Minus	and:		-/		X42=		OR	X84=		
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	ENDEN	TCLAIM		J	+140=		OR	+280=		
11 . C . V . C								TOTAL ADDIT, FEE	<del>, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	OR	ADDIT, FEE	<del></del>	1-
	(Column 1) (Column 2) (Column 3)							AJOH V. FEE		_			
MTC		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER 10USLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	.05	Minus	** _	25	•	]	X\$ 9=		OR	X\$18=		1
ME	Independent	• 3	Minus	***	3	-		X42=		OR	X84=	1	1
F	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+140=	·	OR	+280∋		1
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  * If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."								TOTAL		OR	TOTAL		1
	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE												
Ļ	FORM PTO-475 (Rev. 801)												